## OFFICIAL FILE LLINOIS COMMERCE COMMISSION FORMAL COMPLAINT

## ORIGINAL

Illinois Commerce Commission 527 East Capitol Avenue

	Springfiel	d, Illinois 62794-9280	· · · = · · · · · · · · · · · · · · · ·
Regarding a complaint			For Commission Use Only:
_	ULYSSES FRANKLIN		Case Or 19
by	(Person making the complaint)		
against	PEOPLE GAS (Utility name)		
as to	FINAL BILL ESTIMA	TED	CORPE
	(Reason for complaint)		C. C.
in	CHICAGO	lllinois.	
TO THE ILLINOIS COM	MERCE COMMISSION, SPRINGFIELD	ILLINOIS:	0143= == == == == == == == == == == == == =
My mailing address is_	9755 S. Beverly	· nicago l	DL433
	t I am complaining about is 6	· ·	
THE SELVICE SUGIESS PIE	Chicago, Illinois		
My home telephone nu	mber is [ 773		
Between 8:30 a.m. and	5:00 p.m. weekdays I can be reached	d at SAME	
People G	:AS	(respondent) is a public utility	and is subject to the provisions o
•	ne of utility company)		
the Illinois Public Utilitie	es Act		
In the space below, list complaint.	the specific section of the law, Comm	nission rule(s), or utility tariffs whi	ch you think are involved with yo
	Adm. Code Part 2-80		
Have you contacted the	Consumer Affairs Division of the I	llinois Commerce Commission	ebout YesNo
das your complaint file	d with that office been closed?		YesNc

Please state your complaint briefly. Number each of the paragraphs. Please include any specific time period and dollar amounts involved with your complaint. Use an extra sheet of paper, if needed.

My complaint is that People Gas turned off my gas for payment due. not have my gas turn on but I continued to pay my gas bill. I received a final bill which was due immediately in the amount of \$24.00 which was I immediately started receiving estimated bill in the amount of \$1,674.48 to \$10,528.78 with a different acount number, but in my name.

I dont' understand how I can get charged for services not use?

Please clearly state what you want the Commission to do in this case.
To resolve the questions of \$10,528.78 bill that People Gas states I owe
them for services not rendered.
(Month, day, and year)
Date:
If you will be represented by an attorney, please give the attorney's name, address, and telephone number.
If you will be represented by on ottomey, picose give by ettomey's name, address, and ettopicose name in
You need to file the original and three copies of this form with the Commission and also provide the Commission one copy for
each utility complained about (referred to as respondents).
VERIFICATION
A notary public must watch you fill out this part of the form.
it says. The contents of this petition are true to the best of my knowledge.
· Elypning public

(Signature)

Subscribed and sworn/affirmed to perore me this \_\_\_\_\_\_\_\_\_

Notary Public, Illinois

NOTARY PUBLIC STATE OF ILLINOIS

NOTE:

Failure to answer all of the questions on this form may result in this form being returned to you without processing. If you have questions, please call the counselor in the Consumer Affairs Division that handled your informal complaint